



Last Updated: 03/09/2022

Suspension of the SLH Program - Effective May 1, 2009

The purpose of this memorandum is to inform you that the SLH program is being suspended, effective May 1, 2009. The 2010 State budget, approved by the General Assembly and Governor Kaine, did not include funding for the SLH Program for State Fiscal Year 2010. Consequently, we must take action to suspend the SLH Program.

Because the SLH fiscal year runs from May 1 through April 30, the program is being suspended at the end of the current SLH program year, rather than at the end of the state fiscal year. For those localities that have SLH funds remaining, applications are to continue to be taken for dates of services through April 30, 2009. The DMAS website (www.dmas.virginia.gov) contains a list of remaining SLH balances for each locality.

Coverage for existing SLH enrollees will end on April 30, 2009. DMAS will be notifying current enrollees of the suspension of the program and cancellation of their coverage at the close of business on April 30, 2009. Enrollees are also being given information about resources that may be able to provide assistance with obtaining medical services.

DMAS will continue processing outstanding claims until the funds are depleted. At that time, DMAS will deny all claims that are pending for the edit 0291 - 'Claim pending for locality funding at DMAS' will be denied on provider remits of May 8, 2009. Claims submitted after May 1, 2009, with dates of service prior to or on April 30, 2009, will deny for edit 0834 - 'Denied, SLH locality funds exhausted'. Claims submitted with an admission on or after May 1, 2009 will be denied for edit 0318 - 'Enrollee not eligible on date of service'.



MEDICAID MEMO

Please note that the SLH Program has not been abolished at this time. Should funding be made available in the future, it is possible that the program may be reinstated.

Medicaid
Memo: Special
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REQUESTS FOR DUPLICATE REMITTANCE ADVICES

In an effort to reduce operating expenditures, requests for duplicate provider remittance advices will no longer be printed and mailed free of charge. Duplicate remittance advices will be processed and sent via secure email. A processing fee for generating duplicate paper remittance advices will be applied to paper requests, effective July 1, 2009.

ELIGIBILITY AND CLAIMS STATUS INFORMATION

DMAS offers a web-based Internet option (ARS) to access information regarding Medicaid or FAMIS eligibility, claims status, check status, service limits, prior authorization, and pharmacy prescriber identification. The website address to use to enroll for access to this system is <http://virginia.fhsc.com>. The MediCall voice response system will provide the same information and can be accessed by calling 1-800-884-9730 or 1-800-772-9996. Both options are available at no cost to the provider.

"HELPLINE"

The "HELPLINE" is available to answer questions Monday through Friday from 8:30 a.m. to 4:30 p.m., except on state holidays. The "HELPLINE" numbers are:

1-804-786-6273	Richmond area and out-of-state long distance
1-800-552-8627	All other areas (in-state, toll-free long distance)



Please remember that the “HELPLINE” is for provider use only. Please have your Medicaid Provider Identification Number available when you call.

COPIES OF MANUALS

DMAS publishes electronic and printable copies of its Provider Manuals and Medicaid Memoranda on the DMAS website at www.dmas.virginia.gov. Refer to the “DMAS Content Menu” column on the left-hand side of the DMAS web page for the “Provider Services” link, which takes you to the “Manuals, Memos and Communications” link. This link opens up a page that contains all of the various communications to providers, including Provider Manuals and Medicaid Memoranda. The Internet is the most efficient means to receive and review current provider information. If you do not have access to the Internet or would like a paper copy of a manual, you can order it by contacting Commonwealth-Martin at 1-804-780-0076. A fee will be charged for the printing and mailing of the manuals and manual updates requested.

PROVIDER E-NEWSLETTER SIGN-UP

DMAS is pleased to inform providers about the creation of a new Provider E-Newsletter. The intent of this electronic newsletter is to inform, communicate, and share important program information with providers. Covered topics will include changes in claims processing, common problems with billing, new programs or changes in existing programs, and other information that may directly affect providers. If you would like to receive the electronic newsletter, please sign up at www.dmas.virginia.gov/pr-enewsletter.asp.

Please note that the Provider E-Newsletter is not intended to take the place of Medicaid Memos, Medicaid Provider Manuals, or any other official correspondence from DMAS.